Special Diabetes Program for Indians

Saving lives in Alaska and providing a strong return on federal investment.

History

Congress established the Special Diabetes Program for Indians (SDPI) in 1997 to address the growing epidemic of diabetes in American Indian and Alaska Native (AI/AN) communities. This program has grown and become the nation's most strategic and effective federal initiative to combat diabetes. SDPI is currently authorized through fiscal year 2017.

SDPI Outcomes

SDPI funding supports over 300 diabetes treatment and prevention programs in 35 states, and the results have been extraordinary. The structure of the grant program has allowed Tribes to collect data and document that this investment is both saving lives and saving the federal healthcare system money. For example, according to the United States Renal Data System, there has been a remarkable decline in diabetes incidence rates among AI/ANs since 1998 that has resulted in **a 29% decline**, **more than any other race**, in prevalence rates of end-stage renal disease (ESRD) – a costly complication often linked with diabetes. ESRD requires expensive treatments and is the single largest driver of Medicare costs. The Medicare cost per year for hemodialysis (a common ESRD treatment) exceeded $84,000 per patient in 2013.

"We seriously need the Diabetes Prevention Program in our community. The longer it is here the more people it will help to prevent diabetes."

-Charlotte McConnell,
SouthEast Alaska Regional Health Consortium (SEARHC) Lifestyle Balance and Diabetes Prevention Program

Diabetes in Alaska

According to the Centers for Disease Control and Prevention (CDC), in 2014, approximately 41,180 people in Alaska – **7.6% of the population** – had diagnosed diabetes, and many suffered from serious diabetes related conditions such as heart disease, neuropathy, and eye, foot and skin complications. In addition to the human toll diabetes places on the people of Alaska, it also places a large financial burden on the state's healthcare system. In 2013, the staggering estimate of direct and indirect cost of diabetes in Alaska was approximately $45 million.

FY 2016 SDPI funding in Alaska totaled $10,191,326 for 19 Community-Directed Grant Programs.

Renewal is Vital

SDPI provides a strong return on federal investment and is saving lives in Alaska. Since the beginning of SDPI, blood sugar levels in AI/ANs have decreased, the risk of cardiovascular disease has been reduced, diabetes-related kidney disease progression has slowed, and primary prevention and weight management programs for Native children and youth have increased. **Congress must renew this critical program** to ensure that the SDPI funded programs can continue their important work and that lessons learned from these programs can be shared and replicated to keep Indian Country on the path to a diabetes-free future.

National Indian Health Board